

EXPRESS MAIL CERTIFICATE

EV 315 188 141 US

Serial No.

10/040,010

Applicant(s)

Thomas M. Mills et al.

Filing Date

January 4, 2002

Title:

TREATMENT OF ERECTILE DYSFUNCTION

TECH CENTER ICEAN

Examiner

Bahar, Mojdeh

Group Art Unit

1617

Type of Document(s)

Transmittal Form

Fee Transmittal Form Election and Response

Request for Extension of Time (in duplicate)

Check #342790 in the amount of \$55.00 for a One-Month

Extension of Time

3rd Supplemental Information Disclosure Statement –

(in duplicate) PTO/SB/08A References: 1

Return Postcard

I hereby certify that the documents identified above are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and are addressed to Mail Stop Non Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Emily Guida (signature)

Date of Deposit: October 6, 2003

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/040,010			
		Filing Date	January 4, 2002			
		First Named Inventor	Thomas M. Mills 1617			
		Group Art Unit	1617			
		Examiner Name	Bahar, Mojdeh			
otal Number of Items in This Submiss acluding Transmittal Form)	ion	Attorney Docket Number	M0351-267875 (011-00)			
	ENCLOSUR	ES (check all that apply)				
Fee Transmittal Form See Extracted Check # 342790	☐ Assignmer (for an App		☐ After Allowance Communication to Group			
Election & Response	☐ Drawing(s)	☐ Appeal Communication to Board of			
☐ After Final	☐ Licensing-	related Papers	Appeals and Interferences			
Affidavits/declaration(s)	☐ Petition		☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)			
Extension of Time Request duplicate)	Petition to	Convert to a al Application	☐ Proprietary Information			
Express Abandonment Request	_	Attorney, Revocation	☐ Status Letter			
3 rd Supplemental Information	Change of	Correspondence Address	☑ Other Enclosure(s)			
sclosure Statement (induplicate)	☐ Terminal □	Disclaimer	(please identify below): Express Mail Certificate – EV 315 188 141 US			
Certified Copy of Priority Document(s)	☐ Request fo	or Refund	PTO/SB/08A			
	☐ CD, Numb	er of CD(s)	References: 1 Return Postcard			
Response to Missing Parts/ Incomplete Application	Remarks					
Response to Missing Parts under 37 CFR 1.52 or 1.53						
SIGNAT	IDE OF ARRI	LICANT, ATTORNEY, OF	ACENT			
rm <i>or</i> dividual name Cynthia B. Rothsch Reg. No. 47,040		LICANT, ATTORNET, OF	CAGENT			
Signature CML S	akak					
Date October 6, 2003						

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Date

October 6, 2003

Emily Guida

Signature

Typed or printed name

Complete (if applicable)

(336) 747-7541

Telephone

Date

FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL	AMOUN	T OF F	PAYMENT	ì
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SUBMITTED BY

Name (Print/Type)

Signature

Cynthia B. Rothschild

ENTE II.

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	Complete if Known	$\overline{}$	\
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Application Number	10/040,010		\bigcap
Filing Date	January 4, 2002	<u></u>	J\\\.
First Named Inventor	Thomas M. Mills et al.	Tro. 1	
Examiner Name	Bahar, Mojdeh	CACA	200
Art Unit	1617	C/VICA	
Attorney Docket No.	M0351-267875 (MCG -011-	00)	de.

METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)						
☑ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order		3. ADDITIONAL FEES Large Entity Small Entity							
Order ☑ Deposit Account:			Fee	Fee	Fee	Fee			
Deposit				Code	(\$)	Code	(\$)	Fee Description	Fee Paid
Account	16-1435			1051	130	2051	65	Surcharge - late filing fee or oath	
Number				1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Deposit Account Kilpatrick Stockton LLP			1053	130	1053	130	Non-English specification		
			1812	2,520	1812	2,520	For filing a request for reexamination		
Name The Director is authorized to: (check all that apply)				1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
☐ Charge fee(s) indicated below ☒ Credit any overpayments ☒ Charge any additional fee(s) during the pendency of this application			1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
☐ Charge fee(s) indicated below, except for the filing fee			1251	110	2251	55	Extension for reply within first month	55	
to the above-identified deposit account. FEE CALCULATION				1252	410	2252	205	Extension for reply within second month	
1. BASIC FI	LING FEE			1253	930	2253	465	Extension for reply within third month	
Large Entity	Small Entity	December 1		1254	1,450	2254	725	Extension for reply within fourth month	
	ee Fee <u>Fee l</u> ode (\$)	<u>Description</u> Fee Paid		1255	1,970	2255	985	Extension for reply within fifth month	
***		y filing fee	7	1401	320	2401	160	Notice of Appeal	
		gn filing fee	=	1402	320	2402	160	Filing a brief in support of an appeal	
		t filing fee	-	1403	280	2403	140	Request for oral hearing	
1004 750 2	004 375 Reis	sue filing fee		1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1005 160 2005 80 Provisional filling fee			1452	110	2452	55	Petition to revive – unavoidable		
SUBTOTAL (1) (\$) 0			1453	1,300	2453	650	Petition to revive - unintentional		
30BTOTAL (1) (3) 0			1501	1,300	2501	650	Utility issue fee (or reissue)		
2. EXTRA CLA	IM FEES FOR UT	TILITY AND REISSUE		1502	470	2502	235	Design issue fee	
	Ext			1503	630	2503	315	Plant issue fee	
Total Claims	-20 ** = 0	aims below Paid = 0	\neg	1460	130	1460	130	Petitions to the Commissioner	
Independent	= ** - =	== ^ == - -	╡	1807	50	1807	50	Processing fee under 37 CFR 1.17 (q	, [
Claims	-3 ** = 0	X = 0	╛	1806	180	1806	180	Submission of Information Disclosure Stmt	
Multiple Dependent	0	X = 0		8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
Large Entity Fee Fee	Small Entity Fee Fee			1809	750	2809	375	Filing a submission after final rejection	<u>, —</u>
Code (\$)	Code (\$)	Fee Description						(37 CFR § 1.129(a))	' <u> </u>
1202 18 1201 84		Claims in excess of 20	,	1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	
1201 84 1203 280		Independent claims in excess of 3 Multiple dependent claim, if not pa		1801	750	2801	375	Request for Continued Examination (RCE	,
1204 84		** Reissue independent claims ov original patent	er	1802	900	1802	900	Request for expedited examination	
1205 18		** Reissue claims in excess of 20	and					of a design application	
1205 18		over original patent		Other	/ '	£.3			
SUBTOTAL (2) (\$) 0			Otner to	e (speci	ту)	-			
		L.,		*Redu	ed by B	asic Filin	g Fee P	aid SUBTOTAL (3) (\$) 55	;
**or number previ	ously paid, if greater; Fo	or Reissues, see above						(4) 55	

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(Attorney/Agent)

included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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